The Canadian Nurse

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ADDRESS.*

The history of hospitals and their methods of dealing with their sick, from the earliest dawning of medical science up to the present time, would indeed make interesting matter for pen, skilled to portraying so wonderful a picture. The hundreds and hundreds of institutions that sprang up through the eager centuries of activity stand out boldly on the glorious canvas of the past and give silent evidence of the noble, heroic work of countless armies of men and women who soothed and comforted the sick and the dying through years of storm and stress.

We are living in an age of progress. Everywhere flashes the light of human intelligence. Everywhere glows the "Excelsior" banner urging man upward and onward to the highest pinnacles, and nowhere is this development so much in evidence as in our hospitals. Compare the hospitals of to-day with those of several hundred years ago and what a difference! The development of bacteriology has been instrumental in the saving of millions of lives and bringing our hospitals as near to perfection as possible in the treatment of disease. The spirit of Hippocrates and Florence Nightingale is still abroad calling for the best in the land to consecrate their lives to the godliest and most humanitarian of all causes—that of soothing the cries of agony and distress of life's valleys of pain. I once heard a famous physician remark: "Were anyone to ask what to me seem the greatest epoch marking boons to humanity in the past century I would allot chloroform, antisepsis and the trained nurse the place of distinction." They have truly been a blessing to humanity. The race of mankind would perish did they cease to aid each other. From the time that the mother smiles upon her new-born, till the moment that some kind assistant wipes the death-damp from the brow of the dying we cannot exist without mutual help. All, therefore, that need aid have a right to ask it of their fellow-mortals. No one who holds the power of granting can refuse it without guilt.

The modern trained nurse, as we know, is a product of the last century—the follower of Florence Nightingale, one of the queenliest women who ever lived, patron-saint of the nurses and founder and heroine of hospital nursing as it now exists.

The struggle of the graduate nurse was at first a difficult and most trying one. "It was a long while indeed," writes one, "before even the medical profession as a body regarded her with favor. But after physicians had once

*To the graduating class of 1911 of Berlin and Waterloo Hospital Training School for Nurses by Dr. Fischer, of Waterloo.

begun to realize that with trained nurses it was possible to have their orders intelligently carried out, that chaos and dirt gave way to cleanliness, that the percentage of deaths decreased and recoveries increased, they finally accorded to the trained nurse her professional recognition." And then, there was the struggle with the public. I mention this only to say that a strong prejudice existed in the lay mind against the woman who gave three years of her life to take care of the sick in a hospital and instruct herself in the art of nursing. The prevailing class of attendants upon the sick "had accustomed the public to regard paid nurses as self-seeking menials engaged in something far lower than domestic work, whose only object was to benefit by others' misfortunes at the least expenditure of care and trouble on their part." The times have changed much since then. To-day happily the trained nurse has become a power in the community. She is recognized as belonging to a profession having for its object the care of the sick, her willing hand assisting not competing with the physician and the surgeon. The general public has recognized the importance of the trained nurse in the management of typhoid fever, pneumonia, the infectious exanthemata and other diseases. And then her place in the operating room. Here the acme of her usefulness is reached. The painstaking surgeon cannot do without her services. She really becomes as it were his second-self—the light-hearted creature of willingness. On the battlefield, too, the nurse has taught the mighty world an object lesson of pluck and obedience to the call of duty. It remained for Kipling—the virile poet of Empire—to immortalize the dutiful band of Red Cross nurses who sacrificed their lives on the bleak battlefields of the Boer war. In his book, "The Five Nations," appears a tender heart song in which he extols the greatness and the heroism of these dauntless souls.

"When the days were torment and the nights were clouded terror,
When the powers of darkness had dominion on our soul,
When we fled consuming through the Seven Hells of fever,
These put out their hands to us and healed and made us whole."

The world is brighter for the coming and passing of such lives. The profession of nursing daily sacrifices innocent victims on the altars of duty, but the cold world sets no price on their heroism, their love and devotion.

The profession which you are about to enter bears a noble history. It welcomes to its ranks only those who are mentally fit to discharge the high and onerous duties of the calling, at last you have come to the end of your journey. For three young years you have plodded patiently on—from the first anxious day on which, as a novice, you entered the hospital—that world of sorrow and suffering which you had previously visited often only in your dreams. You have been well instructed and I congratulate you sincerely on having distinguished yourselves so eminently in your examinations. On behalf of the profession I beg to thank you in a special manner for your noble, self-sacrificing efforts while on duty to alleviate the distress and suffering of our patients, for your many acts of kindness to us and to them and for your generous sympathy always so freely given. I also wish to commend

your unswerving loyalty to your Alma Mater and to the Lady Superintendent who has given ungrudgingly of her time and her talents to further your interests. I wish you good luck and God speed!

The hospital you are about to leave has been your workshop, filled with busy cares and responsibilities. The tools in the chest of your mental endowments have been sharpened by careful study and strict discipline—and now an eager, welcoming world expects something in return. The goal of your ambitions have been reached and your fondest hopes have been realized. In the past, many trials, great and small, have loomed up and clouded your brightest horizon. All has not been sunshine and flowers. Your path has often been filled with bitter weeds. The road wound up hill all the way—yes, to the very end. But the steady heart has won out at last—and yours has been the victory.

What can I say to you in the presence of your well-wishing friends who have come to honor you on this happy night of nights that witnesses the crowning of your careers? Live up to the high ideals of your Alma Mater and your life as a nurse cannot be a failure, and always remember Weir Mitchell's dictum—"that to be a good nurse, it is first necessary to be a good woman." Your early home training has been efficient. It will stand you in good stead now. True gifts of the heart far outshine gifts of the mind in the sick room. Your patients will care little whether you are able to translate Cicero or Homer or ready to discuss and criticize freely the men and women in Shakespeare's plays. They will look to you for strict devotion to duty, for little deeds of kindness and mercy, for alleviation of their suffering, for tidiness about the sufferer's couch and for pleasant rays of cheerfulness that rob disease of half its misery. A nurse who cannot handle a broom or dust-pan properly should never be permitted to handle a thermometer. That broom had just as much to do with the development of her career as the knowledge and use of that more delicate instrument which records temperature. "The college graduate," writes a superintendent of many years' experience, "who has never worked with her hands is just as undesirable in one sense, as would be the applicant who has never had an opportunity for developing her mental powers, and has labored all her days with her hands—the one has what the other lacks—but both are one-sided." She who would be a success as a nurse needs the combined qualities of a trained mind and capable hands and body. Perfect physical health, an educated mind, a staunch, noble character, good manners, cheerfulness, humility, gentleness, patience, tact and warm sympathy—all these are the necessary attributes which will enhance your personality and gain for you lasting friendships from among those to whom you will minister. Be solicitous concerning your health! It is one of the precious and great assets of life. What comfort can you give if you yourselves are sick in body? The strain of endless sick-bed watches, if you are not well, will soon undermine your constitution and pave the way for disease that may ruin forever your lives.

Culture has followed you from your home. It is something that has stolen into you through home associations. Without it you would be shallow, commonplace; with it you will be deep, bright with the color of a strong

personality. Be courteous at all times! If you will only study nature you cannot help being so. "I do not see any greed in nature," writes Bliss Carman. "I do not find any creature fighting for more than it actually needs at the moment. I find in the world of green, unflinching possibility, abiding patience and a courtesy that is too large, too sure for the cruelty and greed of man." To be ready for the great crisis of life you must learn serenity in your daily work. Remember always that calmness is the crown of self-control. The first stepping stone to success will be your ability to overcome yourself. No matter what storms be brewing within, let your face ever wear a tranquil look in the presence of your patient, who may be in the terrible throes of a life-struggle, a look of sorrow, regret, anxiety, alarm or surprise may undo in a moment that which it has taken days and weeks to accomplish. Carry the gospel of hope and good cheer into every sick room. It will be a tonic to the unfortunate one thirsting for health, and will nerve him on for the brave battle which he is fighting. Let your coming always be the advent of the day—rosy with promise and thrilling with life.

" 'Tis easy to smile when the sun shines too,
And the sky is a field of blue;
But give me your smile when the sun is gone
And the sky is of leaden hue.

'Tis easy to smile when the birds sing cheer
And you hark to the rippling rill;
But give me your smile when the waters sigh
And the songs of the birds are still."

Your eye should also be well-trained. It should convey confidence, trust, love and sympathy. Furthermore it should always hold its secret in the patient's presence. When you meet your patients let your hearts go out to them. "The spirit that wins," writes one, "is the spirit that says—here is my place, here is where I am needed. I am not here to be ministered unto but to minister. These people have hearts and I will win them and what I win I freely give in return. I take my place in their life and shall try to make them glad that I am here." A frozen heart is precisely on a par with a frozen potato and one is worth just about as much as the other even when thawed out.

Let your tongue be guarded. A silent tongue is better than a glass house. Your knowledge of a patient's whims, eccentricities, remarks, etc., should die a sudden death in the sick-chamber. Furthermore, do not allow an exaggerated professionalism to destroy your usefulness. Also guard against a narrow view of life. Your vision should not be hampered by the four walls of a sick room. Your soul should walk out into the open and expand in a newness of feeling that gives you a larger view of seeming inequalities. The true nurse, just as the sculptor loves his chisel and marble, nurses for the sake of nursing; she loses sight of the money that falls to her lot. She loves her day's work and takes a pleasure in soothing life's many hurts and calm-

ing tired hearts. Do not let your life work consist in building towers of gold that delight but miserly hearts—otherwise your mission for doing good will be handicapped. The poet speaks truly in his lines:—

"Work thou for pleasure; paint or sing or carve
The things thou lovest, though the body starve.
Who works for glory misses oft the goal;
Who works for money coins his very soul;
Work for the work's sake then and it may be
That these things shall be added unto thee."

Your work is a ministry. It is a consecration of your life to something that touches the very pulseblood of humanity. The Master, who made much of sickness and sorrow, should be your model in every action. He comes very near to the nurse, when in the very presence of death she stands by while life withers away in the dying, prostrate form of some unfortunate. Writing of such occasions a nurse remarks:—"The day fades into night; the night-watch has begun, and, toiling through the night until the morning breaks, we find our watch has been with one, who silently and alone has gone out from here to—There, often with a smile lighting up the countenance. We realize that the Master has been aboard and taken one of our sweetest flowers to plant in His garden. Again, the scene changes and we stand at the bedside of one who is cursing his Maker. What an object lesson!" One cannot divorce religion from nursing. The nurse who fails to carry this spirit into her work misses the pearl of greatest value to be found in it.

And now a parting word. Very soon you will be ready to begin life's struggle. The world is anxious to embrace you, and, as you stand waiting on its threshold, we pray that Providence will sunbeam your future with success, and the happiness which always follows duty nobly done. Up from the streets steal the cries of agony and pain and thither you must go, regardless of self and station. You will miss the quiet serenity of your hospital home. The world you are about to enter is noisier than the one you are leaving but you will soon become accustomed to its constant humdrum song. Many new hardships and difficulties will come upon you when least expected but courage and strength will gird you in action. Your night-watches may be tiresome and lonely, your patients may be ungrateful and unreasonable and little trials may crop up frequently to stir the busy heart, but if the love for your profession is great, if you really cherish the high ideals of your calling, you will not murmur but will find in the honest discharge of your duties a compensation which gold cannot buy.

I hope that the words of an obscure poet may one day be applied in acknowledgment of the work of each of you when the profession no longer claims you as white-capped angels of mercy and someone in this wide world has found a home that will never be home without you:—

Thou hast bravely done thy part,
Noble mind and tender heart,

Sown that other hands might reap,
Watched that other eyes may sleep,
And whatever cares oppressed,
Toiled that others might have rest;
Sorrow bore a passport free
To thy ready charity;
Angels have recorded true
Kindly deeds no mortal knew.

THE "SHALL BE" NURSE.

The young woman who is about to leave home, perhaps for the first time, involuntarily glances back over the years that have rippled past, almost invisibly glided by, without one warning note of what the future will demand of her—she briefly reviews the gleeful days of childhood, the careless, happy schooldays, which perhaps ended in a brief season of social pleasures, and then to the commanding call of the struggle for existence she needs must listen, and in that moment awakens to a sense of the realities of life, dons her armor and strikes out for herself from shore, leaving behind her the sunny banks upon which she, many times, in her childhood dreams, built "castles in the air," all oblivious then of the great sea of life upon which she is now about to launch. It may be that her bark will drift if she be too weak to guide it, or that she may fail in determining a definite aim, the seas may be too rough for her gentle nature to combat, or the goal, once obtained, may be a disappointment in its reality. However, the journey, be it stormy or calm, her days for dreaming are over, and the great world, with its motley moving throng awaits her.

Nevertheless, in spite of all these adverse possibilities, there remains the assurance of many recompensing probabilities for one who is earnest and sincere. She who in her home was taught to recognize the principles of truth and uprightness, of kindness, diligence and cheer, starts on her journey well equipped. A pleasing personality is the expression of all that is embodied, natural or acquired, and this, associated with a good physique and well-poised mind, should be sufficient to bridge many difficulties along life's pathway. The "sphere of nursing" is surely a difficult one, and from its depths emerge many a stronger one than went in. Until we come up from some great baptism of trials, we are never our truer and better selves. It is better to be broken in the testing than not tested at all, for it is thus that the sandard is attained. The courageous woman, decisive and fearless, enters the pathway to this field abloom with great possibilities.

For a time at first she may be sensitive to only the thorns, but as time advances, with the healing of these wounds, will be wafted to her senses the fragrance of the flowers she has already planted. At times the clouds will seem to hang dark and heavy, as if the sun might never shine again; a little while and then the clouds which have been festooning the horizon of her sky gradually change to silver fringes and rainbows. Thus the days drift on, and she all the while becoming unconsciously moulded and strengthened. "The woman's realm"—for to woman alone naturally belongs the tender care of the sick and helpless. Were it not so, her frail nature would long since have be-

come inundated by the waves of responsibilities, disappointments and hardships. Naturally she plods on with her mind and heart focussed upon the beacon light which promises that for which her woman soul is striving—the alleviation of pain and suffering.

The selection of the school wherein the would-be nurse is to receive her training is one of the important preliminaries, as much depends upon the selection; then follows the formal application and appointment, which ushers her into that "Holy of Holies," wherein to her mind none but the very fortunate may enter. During her first two or three months as probationer, she has many disconsolate moments, but consoles herself occasionally with the prospect of the approaching day, when she will don the coveted uniform. Innocently, she believes that thereafter her horizon will reflect nothing but sunshine—alas, the road is long and its perspective deceiving; the silver lining in its entirety is not yet, although an occasional ray of hope makes its way through the intricacies of doubt and despair, which at moments seem too much for her.

Thus the years pass by, and finally the day of all days arrives—"Graduation." How much is summed up in that one word! To her it seems to be the golden key to the treasure house of all her hopes and ambitions.

That day of all days she looks her prettiest—like the heroine in the novel who, on her wedding day, "never looked more beautiful!" The stimulus of the occasion is sufficient unto a day of happiness for her. She wears her best-laundered uniform, gives a few extra touches to the arrangement of her hair, one last sidelong glance into her mirror, and then, as if she were leaving a world behind, advances in response to her name, and receives what is hers by right of unparalleled effort. Just what her diploma promises to her remains an unknown quantity, which can only be estimated by daily experience.

MARY A. CATTON,
Superintendent Lady Stanley Institute Training School of the Protestant Hospital, Ottawa.

Gleanings

BISMUTH GAUZE IN PLACE OF IODOFORM.

Dr. Wiener, of New York, writing in the International Hospital Record, advocates the use of bismuth gauze as a substitute for iodoform. It is prepared in the following way. Take two ounces of bismuth subnitrate, two ounces of glycerin and one quart of water. The bismuth and glycerin are very thoroughly mixed, warm water is gradually added, and the mixture is continually stirred so as to make a fine emulsion. A portion containing about twenty-one yards of gauze is passed slowly through the emulsion three times so that it becomes thoroughly soaked, and is then wrung out. After the gauze is dried it is cut into strips of desired size, loosely packed, and sterilized by steam at seven or eight pounds' pressure for thirty minutes. The above strength has proved sufficient for the purposes; it could be considerably increased without harmful effects should the occasion warrant it. The gauze so prepared is snowy white in color, odorless, soft and smooth. There are no grains of powder microscopically visible on it. From plain unmedicated gauze it differs only in its intense white color and in being

smoother and softer to the touch. From iodoform gauze it differs in being odorless, absolutely non-toxic in the quantity used in any one case, much softer, less irritating and less expensive. (Bismuth subnitrate is from 30 to 40 per cent. cheaper than iodoform.) Finally, it is far more efficient in its action. Dr. Wiener has used it in a great many cases, and has found that after incomplete abortions, curettages, plastic operations on the cervix and vagina, and aseptic vaginal coeliotomies, it can be left in the vagina for a week, if desirable, and on removal it is still perfectly sweet and odorless, unless there is infection present. For these reasons he believes it ought to supplant iodoform.

A specimen which has been submitted to us by Burroughs, Wellcome and Company bears out all that has been said of its utility and compactness. Prepared in widths of one, two or three inches, it compresses into quite small packets of one-yard rolls, carefully sterilized and surrounded by varnished serum-proof covers.—The Nursing Times.

A CEMENT THAT STICKS.

The following cement is said to stick on anything: Take of clear gum arabic two ounces, of fine starch one and one-half ounces and of white sugar half an ounce. Reduce the gum arabic to powder and dissolve it in as much water as a laundress would use to render one and one-half ounces of starch fit for use. Dissolve the starch and sugar in the gum solution. Then place the mixture in a vessel and plunge the vessel itself in boiling water and let it remain there until the starch becomes clear. The cement should be as thick as tar, and remain so. It can be kept from spoiling by dropping in a lump of gum camphor or a little oil of cloves or sassafras. This cement is said to be very strong, indeed, and will cause glazed surfaces to adhere perfectly. It is useful for repairing specimens of rocks, minerals or fossils that may have been accidentally broken.—Indianapolis Med. Jour.

TO REMOVE PLASTER BANDAGES.

A very simple and easy method of removing plaster bandages requires only a little vinegar and a simple knife, even a pocket knife will do. The future line of section of the plaster should be wetted with a sponge soaked in vinegar. After a minute the softened dressing may be cut at this place without the least difficulty or any discomfort to the patient. This makes it possible to remove in one and one-half minutes a plaster dressing composed of eighty turns of the bandage and sufficient to hold a fracture of the thigh. —La Garde-Malade Hospitaliere.

Gasoline is the best solvent for the face of surgeon's adhesive plaster. The liquid should be freely applied with a wad of cotton. The plaster may then be removed without violence or depilation. So effectual is the solvent that the surgeon will not care whether the cementing material does or does not come away with the cloth. It is merely a matter of a few wads of cotton more or less.—The Dietetic and Hygienic Gazette.

THE NURSE.

The nurse she leads a happy life,
With rare forethought her acts are rife;
She "has to taste" my fruit and wine;
I would the nurse's life were mine.

While I lie tossing on my bed
With weary limbs and aching head,
She follows out, with visage grave,
The orders that the doctor gave.

I try to tell her of my ills,
But she just brings me draughts and pills,
Which fill me with a greater woe
Than that which I already know.

When I, protesting, lift my voice,
She tells me that she "has no choice,
Those are the orders that she took"—
And shows them written in a book.

Then, when this little song she's sung,
Beneath my most unwilling tongue
An old thermometer she pokes:
My wailings are to her but jokes.

She makes me lie just so, in bed,
And says, "Don't swear, 'twill hurt your head,"
But gives of sympathy no sign—
I would the nurse's life were mine!

The doctor calls—he's gay and young—
He takes my pulse, and views my tongue,
Then steps outside, so does the nurse;
I then feel sure I must be worse.

When she returns, I mildly say:
"Nurse, why were you so long away?"
Her answer is an echoing mock:
"The doctor says you mustn't talk!"

And every afternoon at three,
No matter how it fares with me,
In stunning hat and gorgeous gown,
She makes excuse to "go down town."

All sad and lonely there I lie
With none to weep though I should die,
While she (the minx) a gadding goes,
And eats ice cream, or flirts, who knows?

I've sometimes wished to wear a crown
And see a grovelling world bow down;
But when I long for the DIVINE,
I would the nurse's life were mine!

—GEORGE F. SIMPSON, M.D.

CORRESPONDENCE.

Miss Ella Baker, Telegraph Creek, B. C., writes to wish "The Canadian Nurse" every success and encloses $4 for the Canadian Nurse Fund with the renewal of her subscription. We are grateful to Miss Baker for her good wishes expressed in such a substantial way.

QUESTION BOX.

1. What should be temperature of vaginal douche to control uterine hemorrhage?
2. What should nurse do in perforation in typhoid fever and what in hemorrhage?
3. How should nurse collect and send away to a doctor specimen of sputum?
4. What is difference between contagious and infectious disease? Give example of each.
5. What is measles? What constitutes proper nursing care of measles?
6. Should measles be strictly isolated?
7. Should nurse go home to sleep?
8. What is distinguishing symptom between epilepsy and hysteria?
9. What is usual diet in acute gastritis, and what general diet in disease of the heart?

INQUIRER.

At the October meeting of the Matrons' Council of Great Britain and Ireland a letter to *The British Journal of Nursing* was read asking the Council in how many hospitals it is the rule to teach probationers the A.B.C. facts respecting venereal disease before sending them into the wards. Some members said that they gave definite instructions on the subject in their classes when speaking of infectious diseases, and others that, in the event of a patient suffering from a contagious disease of this kind being admitted to a ward, the sister would give the necessary instructions to the probationers.

It was agreed that a lady doctor should be invited to address the next meeting of the Council on the subject, and that the Matrons' Council should formulate a scheme of instruction for probationers.

This is a step in the right direction.

THE SCHOOL NURSE.

Regina is taking steps to establish an eye, ear, nose and throat free out-patient department in connection with the General Hospital, for the benefit of public school children whose parents cannot afford the proper treatment. The Board of Governors of the hospital has the matter in hand and it is expected that arrangements will soon be complete.

The Toronto staff of school nurses has been increased to nineteen. The two last appointed were Miss Laura M. Thompson, graduate St. John's Hospital, Brooklyn, N. Y., and Miss A. Mary Roberts, graduate Toronto General Hospital.

The Canadian Public School Nurses' Association held its regular meeting at the Brown Betty, 42 King Street East, Toronto, on November 6. Plans for the winter's work were discussed, after which a social hour was enjoyed.

Dentists will tell you that an absolutely clean tooth cannot decay. If this be true, and there is no reason to doubt it, why not keep the teeth "absolutely clean" and save tooth-aches and dentist bills?—*Bulletin Chicago School of Sanitary Instruction.*

The Chronicle, Vancouver, B. C., of October 20 contains an article by Ruth Judge, Secretary of the Vancouver Graduate Nurses' Association, on State Registration of Nurses, which sets forth clearly the benefits of registration. The trained nurse will be distinguished from the partially trained or untrained, thus protecting not only the medical and nursing professions but the public. The training of nurses will be broadened and systematized. "Set a good standard, make a good training worth while, and the difficulty of getting the right probationers will be met half way."

Miss Judge speaks thus of the proposed Bill for British Columbia:

"The Bill is a very fair one. A good standard of nursing is set for those who wish to become R. N.'s. Examinations will be held by a Board, consisting of two doctors and four nurses, and the Board will have also power to revoke or suspend a R. N. certificate if a nurse has proved herself incompetent. Any graduate coming into the Province may practise while waiting to get her R. N., and the untrained may carry on their work, with the one reservation that they may not affix the letters R. N. after their name.

"Other professions set their standard in British Columbia. Doctors, lawyers, surveyors, and there seems no reason why one, like those just mentioned, which cannot be dispensed with, should not have theirs also. Does the opposition, after all, resolve itself into the eternal sex question—because we are women we should not have State recognition?

"It has also been said that if registration is passed a woman will not be allowed to nurse her own mother. This is absolutely absurd, if one considers the subject at all. As well try to make it illegal for a mother to wash her own child's face."

Justice to the graduate nurse who has worked for three years to gain her diploma is a plea for State recognition.

This is the picture on the Calendar published this year by The Graduate Nurses' Association of Ontario. The funds are for Registration Work. The Calendars are 25c. each and may be obtained from the Editor, 41 Rose Avenue, Toronto.

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Editorial

STATE REGISTRATION.

The very excellent system of voluntary registration of nurses in Australia is emphasized by *The Australian Nurses' Journal* which, while deploring the delay in securing State registration, speaks thus:

"Not that this delay is greatly to be deplored, for the present system under which training schools are controlled and nurses registered leaves nothing to be desired as regards supplying the demands for thoroughly trained and efficient nurses. It is not too much to say—not only on our own judgment, but on those who have visited here from other lands—that the present body of nurses in the Commonwealth compare more than favorably with those in other parts of the world as regards thorough and practical knowledge of their work in all branches. Rare is it now to meet a nurse who is not a member of the A.T.N.A., and rarer still to find a nurse who has not a good, common-sense knowledge of nursing. So with the present condition of the nursing profession we can calmly view the slow and uncertain progress towards State registration in the various States, but it behoves each Branch of the Association to keep a watchful eye on all proposed Bills to see that such measures in no way lower the present standard of nursing demanded by the A.T.N.A. and existing among its nurses."

The Isla Stewart Oration is to take place in the Council Chamber of the Guild Hall, London. The oration—"Isla Stewart, Her Life and Influence on the Nursing Profession"—will be delivered by Miss Cox-Davies, President of the League of St. Bartholomew's Hospital Nurses. It is fitting that the Corporation of the City of London should grant the use of its Council Chamber for the honoring of Miss Isla Stewart, who, as the Matron of St. Bartholomew's Hospital, devoted twenty-three years of her life to the care of the sick of the city. —*British Journal of Nursing.*

Sara E. Parsons, R. N., Superintendent of Nurses, Massachusetts General Hospital, Boston, tells, in *The American Journal of Nursing* for September, of a new method of better fitting nurses to cope with the difficulties that confront them in private practice. The idea was suggested by the use of the case method of teaching nurses used by Dr. George S. C. Badger. "Twice a week he takes a group of nurses to the wards and divides them among the patients whom he has previously selected as subjects. Without reference to the clinical charts the nurses are expected to note all the objective symptoms of disease, to feel the pulse and to be ready to tell Dr. Badger what they have seen. He quizzes them as to the possible significance of their observations and later gives them a lecture on the cases thus studied. These clinics are a most interesting, stimulating part of the curriculum.

"Another adaptation of the case method was suggested to me one day when talking with Miss Ida Cannon of the Social Service Department. She was speaking of its use in law, medicine and social training. I determined to get material as soon as possible and try it out on my seniors as a preparation for private duty nursing. The care of the patient is not the problem that confronts the well-prepared nurse in private practice. What puzzles and sometimes confounds her is the attending circumstances with which she must cope, and these are of such diversity that the ordinary hospital instruction is quite an inadequate preparation. Indeed, one actually hesitates to tell the innocent pupil the problems that may confront her and thus possibly frighten her or make too conspicuous certain phases of nursing life. The interest manifested by the class in these lessons and their real value leads me to tell of the experiment.

"Several nurses who have had considerable experience in private work were kind enough to furnish me with descriptions of a number of situations in which they found themselves that involved some problems either professional, financial or moral. They would also state how they dealt with the situation and what was to be learned from it. At class I would read a few of these cases to the nurses, who would write them down. They were instructed to consider them during the following week, and certain nurses were told to come to the next recitation prepared to discuss them. The next week these members of the class told how they would deal with such situations, and an open discussion would follow. The instructor ended the discussion by demonstrating why certain suggestions were fallacious or unethical and why others were worthy of commendation. The cases brought out the unexpected professional difficulties as well as the moral aspect of many of the unusual situations in which nurses may be placed."

These cases among others were presented:

"What would you do if called on a case as second nurse and found a nurse already on the case who you knew had been dismissed from a training school for the offence of stealing?"

"If you had been caring for a male patient in his own home and the doctor advised him to go to some resort for convalescence, and it was not convenient for the patient's wife, mother or sister to accompany you and the patient, what would you do?"

"If called to a woman who had an incurable cancer, unable to be moved from her bed, a question of only a few weeks before she must die, the patient dependent entirely upon her two sons, ordinary laboring men, for support, reserve funds exhausted by long illness, doctors' and nurses' bills, patient's room and bed in a filthy condition and alive with vermin, what would you do?"

The result of these lessons was to impress me very keenly with the great need of them. Most of the class were wholly unprepared for the ethical solutions of the different situations, although they had had an excellent course of lectures on private nursing.

This seems a most practical solution of the problem "How better to prepare the nurse for private work," and comes from a hospital that is foremost in progressive work.

A new Department of Nursing was inaugurated on November 15 in Toronto by the Metropolitan Life Insurance Company of New York. Two nurses, Miss Lindsay, graduate Toronto General Hospital; Miss Kirke, graduate of New York, have been engaged to do visiting nursing among the company's industrial policyholders in Toronto. Continuous nursing may sometimes be necessary and for this the company will employ other nurses. This work is undertaken, not as a philanthropy but as a business, a part of the day's work the company has appointed for itself, and covers a wide area, as the following from *The Intelligencer* shows:

In June, 1909, the Nursing Service received its first trial in a portion of New York City. Two months later the field comprised New York, Baltimore and Washington. In September, 1909, Chicago, Cleveland, St. Louis and Boston were added. In the early part of 1910, Montreal, Worcester, Lowell, Trenton, Harrisburg, Buffalo and Cincinnati were organized. During the remainder of 1910, sixty-six other cities were added to the list, so that at the end of last year ninety cities were being covered.

The company is extending the Nursing System to cover the entire country. When fully established it is estimated that the cost will be $500,000 a year. "We cannot yet tell," Vice-President Fiske says, "whether, as a matter of economy, the system will or will not pay. Some curious facts have been observed. For instance, more than once we have taken two cities of about the same size and industrial conditions, and found that the death rate experienced by the company in the city in which we had a Nursing Service had decreased very much more than it had in the same period of time in the other city, where we have no Nursing Service. Of course, it is not claimed that this comparison is any conclusive evidence, and yet it would be curious if it were merely accidental. Whatever else is true, it is true that we are meeting, and in a practical way, the responsibility that we feel towards the people who support us."

This scheme will go a long way towards helping to solve the problem "How to provide skilled nursing for the family of moderate means."

The poem "The Nurse" will be read with keener appreciation by the nurses when they know that the late Dr. George F. Simpson, of North Adams, Mass., was ever a friend to the nurses and did much in his own city for undergraduates as well as graduates. His sincere appreciation of the nurse breathes through his poem. What reward is better than appreciation?

Hearty congratulations to Miss Ayres, the first Nurse President of the Royal Victorian Trained Nurses' Association, Australia. This Association is carrying on a most splendid work, having firmly established registration for nurses. Legal recognition must surely follow such clear demonstration of the benefits of registration. The Association is to be congratulated upon its selection of Miss Ayres as its President.

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Regular meeting, second Monday, 3 p.m.

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Regular meeting, second Thursday, 3.30 p.m.

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Regular meeting, second Tuesday, 3 p.m.

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The Association meets every six weeks.

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The Canadian Nurse—Miss M. Butchart.

Regular meeting first Friday, 3.30 p.m.

The Guild of Saint Barnabas

CANADIAN DISTRICT

MONTREAL—St. John Evangelist, first Tuesday Holy Communion at M. G. H., 615 a.m Second Tuesday, Guild Service or Social Meeting, 4 p.m. Third Tuesday, Guild Service at St. John's, 8.15 p.m. Last Tuesday Holy Communion at R. V. H., 6.15 a.m.
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TORONTO—St. Augustine's Parish House, 8 Spruce Street, last Monday, 8 p.m.
Chaplain—Rev. F. G. Plummer.
Superior—Miss Brent.

QUEBEC—All Saints Chapel, The Close. Guild service, fourth Tuesday, 8.15 p.m.
Chaplain—The very Rev. the Dean of Quebec.
Superior—Mrs. Williams, The Close.

(Continued from November)

THE ARCH-CONFRATERNITY OF THE "MISERICORDIA," FLORENCE.

As may be imagined, the funeral ceremonies of all members of the Misericordia are conducted with great solemnity, and they are interred in a private burial-ground belonging to the Confraternity. The well-known cemetery of the Misericordia outside Porta Pinti had to be closed owing to lack of space in 1898, and the present one is situated at Soffiano, outside Porta S. Frediano. The strict observance of official rank, which forms such a feature of the company, is continued even in the grave, for part of the burial-grounds is set apart for Capi di Guardia only, and the style of monument that may be erected varies with the grade of the departed. It is the same with the funeral ceremonies. On the death of a Capo di Guardia a catafalque, covered with a purple pall bearing the arms of the Misericordia, is exposed for one day in the doorway of the Oratory, and the bell is tolled for three-quarters of an hour in the morning, and for half an hour in the evening. If the Capo di Guardia was an ecclesiastic, a "berretta" is placed on the pall; if a layman, the large black felt hat that forms part of the dress. In the evening the body is brought to the Oratory for the funeral service, accompanied by all the brethren, with eight torches, and it is afterwards taken out to the cemetery at Soffiano. All the ecclesiastics who are Capi di Guardia are bound each to say a mass for the soul of their departed comrade, while the laymen are enjoined to recite the seven Penitential Psalms.

(To be Continued)

THE GRADUATE NURSES' ASSOCIATION OF ONTARIO.

(INCORPORATED 1908)

President, Miss Bella Crosby, 41 Rose Avenue, Toronto; First Vice-President, Miss Mina Rodgers, General Hospital, Niagara Falls, Ont.; Second Vice-President, Mrs. W. S. Tilley, Kingston; Recording Secretary, Miss E. Ross Greene, Hospital for Incurables, Toronto; Corresponding Secretary, Miss Jessie Cooper, 30 Brunswick Avenue, Toronto; Treasurer, Miss Mary Gray, 505 Sherbourne Street, Toronto.

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Conveners of Standing Committees—Legislation, Mrs. Paffard; Revision of Constitution and By-Laws, Miss A. J. Scott; Press and Publication, Miss L. L. Rogers; representative to the Canadian Nurse Editorial Board, Miss Jamieson.

The Executive held its regular meeting in the Graduate Nurses' Club Room, Canadian Foresters' Building, 22 College Street, on Wednesday, November 1. Eleven members were present. The Treasurer's report showed $418.81 in bank A great many members are in arrears for fees. The Treasurer would like to hear from all these as soon as possible.

The calendar is ready. The picture appears on another page. Orders may be sent to the President, 41 Rose Avenue, Toronto, and will receive prompt attention.

Registration is the question prominently before us now. The calendar is sold to raise funds for this work.

A copy of the New Zealand Act has been received. Registration there is under the Department of Hospitals and Charitable Aid. The nurse in charge of the work warns us not to put a definite standard in our Bill but allow power to change the standard as nursing education advances. This is the very thing we are trying to do. To put a hard and fast standard in our Bill would not be benefiting by the mistake of five years ago.

THE CANADIAN NURSES' ASSOCIATION AND REGISTER FOR GRADUATE NURSES—ESTABLISHED 1895—INCORPORATED 1901.

President—Miss Phillips.
Vice-Presidents—Miss Tedford and Miss Colquhoun.
Treasurer—Miss Des Brisay.
Secretary—Miss Colley, 133 Hutchison St.
Registrar—Mrs. Burch, 175 Mansfield Street.
Reading Room—The Lindsay Bldg., Room 611, 517 St. Catherine St. West.
Lectures—From November until May, inclusive, in the Medico-Chirurgical Society Rooms, the first Tuesday in the month, at 8 p.m.

The regular meeting of the Association was held on November 7 at 8 p.m. Miss Phillips, the President, presided.

Miss Crosby, President of the Graduate Nurses' Association of Ontario, addressed the members on "Registration." There was a large audience and an interesting discussion on the subject followed the address. A standing vote of thanks was tendered Miss Crosby. Refreshments were served and a social half hour much enjoyed by all.

Miss Colley entertained at the tea hour on Tuesday, November 7, in honor of Miss Crosby.

Miss Reta Owens and Miss Nelson have gone to New York to take up private work.

Mrs. Dow is visiting in Saranac.

Thirty new members were received.

The list of lectures for the winter is complete and is most interesting.

My Scallop Shell of Quiet

A CHRISTMAS PRAYER

For Those Women Who Minister to the Needs of the Sick and Dying.

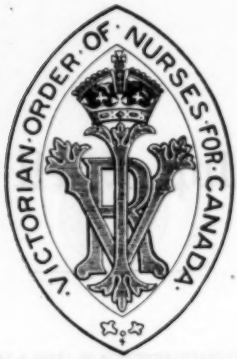
O Thou who dwellest beyond the stars, whose eternal laws are found in the petals of a flower and in the heart of man, we pray Thee for our patient ones who sacrifice themselves that others may live. Grant them strength and courage to fulfill their appointed task. Enshrine in their hearts Thy gracious love for Humanity, an anodyne for the anguish of sickness, a light through the Valley of the Shadow of Death.

Give to us all grace to cherish Thy priceless gift of sweet and gentle womanliness in whatever path Thou dost call us. Teach us loyalty to each other and to our Common Cause, that by united effort we may reach higher planes of thought and action.

Grant the happiness of that inner hidden meaning of Christmas Cheer to those shut in ones whose weary vigils through the long night keep them without the glow of the Yule Log fire. Bless those who strive that humble toil may have its fair reward; that little children may have the childish joy in their young lives unhampered by the cruel yoke of want and strife in the purlieus of trade. Grant the benison of a Christmas Hope in the hearts of these, Thy lesser ones, to thrill with visions of a coming day when Right shall rule.

Especially in this time, when the sweet influence of the Natal Day of Thine Anointed One appeals to us again, do Thou grant us Grace to open our hearts to serve our kind as He who taught in Galilee. By Mary, the Mother of the World's Hope, we beseech Thee, hear this our petition and grant that our lives may bear Thy message of Peace on Earth, Good Will toward Men.

E. C. P.



The summer and autumn are taken up with the inspection by the Chief Superintendent of existing branches of the Order, from the extreme east to the extreme west, and the organizing of new branches in the course of the tour. Every year more time is claimed for both. The Superintendent has been in the north and west since early August and will be until well into November. The wonderful extent, the beauty and the splendor of the west are impressed on one more and more each year.

The steady stream of settlers from all over the world pours in: cities spring up in a night, and the problems of the care of these thousands—not only their physical, but their mental and spiritual care—have to be met and solved.

The Victorian Order of Nurses has been in the field for some time and realized the needs of the people for nursing care and hygienic teaching. As we travel and talk with the people who know, it is most gratifying to hear their many words of praise for the nurses of the Order. Often it happens that away out on the prairies, when speaking to an interested little group collected from the country for miles around, the Superintendent finds that, in the audience, she has one who has been ministered to by one of the nurses away in the Maritime Provinces, and the clasp of the hand and the broken words speak eloquently of the fact that the need had been there and had been great, but had been met by our nurses. There is nothing equal to that!

Everywhere on the western tour encouraging growth and progress have been met. More nurses are always needed—nurses fully trained and tested for the work. The standards of the Order have always been high, and the west has always appreciated the best and objected to seconds.

This year many visits of organization have been paid. Requests for such have been puoring in all year. And as each little place is studied, with a view to helping build a hospital or establish a Lady Grey nurse, each takes on an individuality all its own, and claims our whole attention and interest for the time.

In last month's "Canadian Nurse" you read—we hope you all did—about little Islay in sunny Alberta, and we are sure you must have been thrilled by the valiant efforts made there by the people to have a little hospital for the village and its surrounding country, which would be their own especial care and pride. And there are many such, where a few enthusiastic souls fire their fellows and keep the spark aglow in spite of storms and poor crops. Enthusiasm

is such a tonic! And how the people do look for it in their nurses. There is no use for the blasée, censorious, uninspiring nurse in the West. So let her be advised and stay at home. But for the woman, strong, valiant, enthusiastic and filled with love of humanity, there are golden opportunities. Let our nurses consider this well. Like calls to like!

A post-graduate course in district nursing—four months— is given at one of the training centres of the order—Ottawa, Montreal, Toronto, Winnipeg. For full information, apply to the Chief Superintendent, 578 Somerset Street, Ottawa; to the District Superintendent, 29 Bishop Street, Montreal; to the District Superintendent, 206 Spadina Avenue, Toronto, or to the District Superintendent, 145 Sherbrooke Street, Winnipeg, Man.

HOSPITALS AND NURSES.

The Toronto Western Hospital Alumnae Association held its first meeting for the season on October 5 at the Nurses' Residence. There was a good attendance. The question of raising private nurses' rates was discussed but was not approved. Plans for the winter's work were discussed. A social half hour was enjoyed at the close.

The second meeting was held on November 2 at the Nurses' Residence. Four new members were received. It was decided to give the graduating class complimentary membership for one year. Dr. Margaret McAlpine gave an address on "The Women's Institute in Canada, its Growth, Uses, etc." A complete history of the movement was given and Dr. McAlpine's address was thoroughly enjoyed by all present.

On Thursday, October 26, the Alumnae Association of the Toronto Western Hospital gave a kitchen shower at the home of Miss Cooper, 30 Brunswick Avenue to Miss Huck, who is to be married in November.

The Alumnae Association of the Guelph General Hospital Training School for Nurses appointed the following officers for 1911-12: Honorary President, Miss Reekie; President, Miss Janet Anderson; Vice-President, Miss Armstrong; Secretary, Miss M. Walker; Treasurer, Miss Millar; representative "The Canadian Nurse," Mrs. A. A. Anderson, 123 Cork Street.

The regular meeting was held on November 7 in the lecture room of the Nurses' Residence. After the disposal of routine business, a lecture, full of helpful suggestions, was delivered by Dr. C. C. Latham on "The Care of New-Born Babies." This lecture was most interesting and the Association is looking forward to having addresses from the different doctors during the winter months.

The Graduate Nurses' Association of Thunder Bay District held its regular meeting on November 2 with a good attendance. Two new members were received, making a membership of twenty-six. It was decided to seek affiliation with the Canadian National Association of Trained Nurses.

Miss MacDonald, of Fort William, will spend the winter in Parry Sound.

Miss Annie Bradley, graduate of Jeffrey Hall Hospital, Quebec, has

returned from a two months' trip to Vancouver and Victoria, B. C., and Portland, Oregon, and will resume practice in Fort William, Ont.

Mrs. Harvey, Secretary Graduate Nurses' Association of Thunder Bay District, enjoyed a trip to the coast this summer. The pleasures of such a trip are not easily described.

The annual graduating exercises of the Training School for Nurses at the General Hospital, Guelph, were held at the Nurses' Home on Friday evening, November 3, and proved a most delightful affair. The ceremony of presenting the graduates with their badges and diplomas was a simple yet impressive one, and the entire proceedings were most interesting.

Mr. A. W. Alexander, President of the Board of Directors of the General Hospital, presided. The room was beautifully decorated, the platform being draped with the Red Cross, Canadian flag and the Union Jack, and banked with palms and flowers. The nurses were the recipients of many beautiful floral gifts and wore American Beauty roses, the gift of Mr. Alexander.

The musical programme was most enjoyable. Thain's orchestra gave excellent selections during the evening. Vocal solos were contributed by Mrs. Moore and Messrs. W. Simpson and W. G. Howell; instrumental by Miss Greta Crowe, Mr. C. R. Crowe and Master Douglas Crowe, with piano, 'cello and violin; instrumental duet, mandolin and piano, Misses Laurine and Gladys Pequegnat, and piccolo solo by Mr. Alex. Rundle. Mr. Martin made a very efficient accompanist.

Ven. Archdeacon Davidson made a short address to the Graduates, in which he pointed out the great influence of the nurses over their patients and the noble work they were undertaking.

The Florence Nightingale "Hipocratic," oath was then administered by Dr. Henry Howitt, who, after the nurses had subscribed to the oath, pinned on the hospital badges of red and white. Dr. Angus MacKinnon then presented the graduates with their diplomas.

The members of the graduating class for 1911, who received their diplomas, were: Miss L. Reba Galloway, Burlington; Miss Louise M. Hopkins, Toronto; Miss Katherine T. Holmes, Nassagaweya; Miss Nancy M. Irvine, Brampton; Miss Christina Gordon, Winterbourne; Miss Ida Wilson, Durham, and Miss Gertrude R. Clendenning, Stouffville.

Light refreshments were then served to the many guests, following which the nurses held an informal dance, Thain's orchestra supplying the music.

Miss Gardiner, graduate of Brandon General Hospital, is now on the staff of the City Hospital, Saskatoon, Sask.

Misses Knowlton and Stone, of Brandon, are now in Vancouver, where they are engaged in private nursing.

Miss H. A. Eamer, who took the short course in domestic science in the Macdonald Institute, Guelph, during the past summer, has resumed private nursing in Brandon.

Miss Jessie Fenton (B. G. H.) has returned to Brandon after a four months' visit to her home in Ireland.

IN 1898

The London Lancet, after a careful examination of

SCOTT'S EMULSION

reported that "the preparation fulfills ALL the requirements and presents ALL the conditions of a very satisfactory emulsion. In appearance and consistency it is not unlike cream and under the microscope the fat globules are seen to be of perfectly regular size and uniformly distributed. So well has the oil been emulsified that even when shaken with water the fat is slow to separate. The taste is decidedly unobjectionable and the Emulsion should prove an excellent food as well as a tonic."

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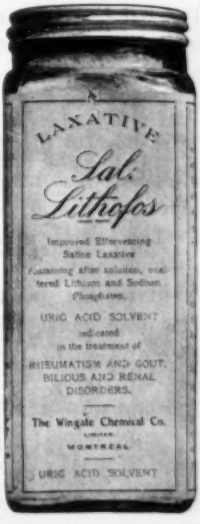

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Miss K. Brennan and Miss Olive Brennan, who has had charge of the operating room in St. Joseph's Hospital, Chatham, have gone to Colorado Springs to take hospital positions. They are gradautes of St. Michael's Hospital, Toronto.

Misses Isobel M. MacIntosh, Irene Elliott, Madeline Hunt and Carrie Dow, graduates of Hamilton City Hospital, have gone to the Women's Hospital, New York, for a post-graduate course.

On Friday, October 29, at 3 p.m. the Florence Nightingale Association held the first meeting of the season at the rooms of the Toronto Graduate Nurses' Club, Foresters' Building, College Street. The plan of work for the coming year was discussed, also the raising of the nurses' rates. Miss Margaret Urquhart was appointed to the Registry Committee. Miss Margaret Hunter and Miss Van Every were appointed to the Executive Committee in place of Miss Griffith and Miss Kinder who retired. Miss Hoyt will act during Mrs. Valentine's absence. The next meeting will be held in December.

During the past few months the building for contagious diseases, Victoria Public Hospital, Fredericton, N. B., has been renovated. Three new rooms and a ward were opened for scarlet fever cases. A new heating system and telephones have been installed. We have a very complete contagious hospital.

Miss Madeline Spencer, who graduated from Victoria Hospital one year ago, has since taken post-graduate work in Toronto in the Victorian Order and is now in charge of that work in London, Ontario.

Miss Annie Graham, who graduated from Victoria Public Hospital, Fredericton, N. B., in August, 1911, has taken a position in the Memorial Hospital, Pawtucket, Rhode Island.

Miss Laura Reid, who graduated from Victoria Public Hospital on November 17, will go to Oregon, U. S. A., to practice her profession.

The King's Daughters of Fredericton, N. B., have engaged a nurse to do district work amongst the poor and needy of the city. The nurses-in-training will be given a month's experience in that work.

Miss Agnes Fitzgerald, graduate of St. Michael's Hospital, has gone to Denver, Colo., for the winter months.

The first Graduation Exercises in connection with the training school of the General Hospital, Sault Ste. Marie, took place on Friday evening, November 3. The interesting function was held in the medical ward on the second floor, which had been transformed into a spacious hall and was tastefully decorated for the event.

The programme consisted of orchestra selections, a solo by Mrs. Starkey, the presentation of diplomas to the graduates, and of a gold medal to the graduate obtaining the highest marks, and addresses by Drs. Gibson, McCaig, Fleming and Rev. J. J. Connolly.

Dr. Gibson presided, and opened the proceedings with a short address in which he reviewed the history of the General Hospital and told of the difficulties under which the medical men of the town labored before its establishment.

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Dr. McCaig gave an address brimful of the best advice to the graduates and appropriate to the occasion.

Rev. Father Connoly in a felicitous little speech praised the work of the hospital and spoke in high terms of the merit of Canadian girls as nurses.

Added pleasure was given the event by the presence of Rev. Mother Duhamel, and Sister St. Cyprian, both of whom journeyed to the Soo to be present at the exercises.

The diplomas were presented by Dr. Gibson. The graduates were also given badges, which were pinned on by the Mother Superior.

The graduates are: Miss Ivy Reynolds, Sault Ste. Marie; Miss Armene Brabant, Algonquin, Mich.; Miss Mildred Kehoe, Wyman, Que.; Miss M. Watters, Jockvale, Ont.; Miss Jean Scott, Webbwood; Miss Loretto Conway, Pembroke.

Through the generosity of Mr. John O'Boyle a gold medal was awarded for general proficiency. Miss Brabant, who received this, had obtained exceptionally high marks in her examinations. Amid tumultous applause the medal, suitably engraved, was pinned on by Mrs. O'Boyle. Dr. Fleming said a few words on behalf of the nurses by way of reply to the many felicitous words that had been spoken in their regard.

Subsequently the guests and friends of the nurses were entertained in the nurses' dining-room, where refreshments were served.

Mrs. Mill Pellatt has resigned her position as Treasurer of the Toronto General Hospital Alumnae Association. Mrs. E. M. Feeney, 39 Grove Avenue, has been appointed to the position.

Miss H. B. Fralick, graduate of Toronto General Hospital, class '97, now residing in Vancouver, B. C., spent a few days in Toronto in October. Her many friends were delighted to see her and learn of her success in the profession in the West.

Miss Buckels is in charge of the Lady Minto Hospital at Melfort, Sask.

Miss Ritchie succeeds Miss Aikman, who has resigned as Matron of the Swan River Hospital, Manitoba.

Miss Sharp has been appointed V. O. N. nurse at Grand Mere, Que.; Miss Sale at Sherbrooke, Que., and Miss Bertrand goes to St. John's, Que., to open the district there in November.

Miss Smith has been appointed nurse-in-charge of the anti-tuberculosis work in St. John, N. B.

Miss Trusler, who has been in charge at Grand Mere, Que., is taking a rest before accepting another post.

Miss Cuntz is in charge of the Shoal Lake, Manitoba, Hospital.

Miss McCutcheon takes charge of the Winnipeg district, November 1.

Under the auspices of the Graduate Nurses' Association of Berlin and Waterloo, Dr. F. J. Housburger, Dominion Representative of the International Congress of "Hygiene and Sanitation" held at Dresden, Germany, this past year, gave a very interesting and instructive talk on the subject. A large and appreciative audience greeted Dr. Housburger.

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Winter Classes open on Jan. 9, and March 12, 1912
Spring Class opens on May 15, 1912

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DANIEL D. HOYT, M.D. (Demonstr., U. of Penna.)

HOWARD A. SUTTON, M.D. } (Instructors Univ.
ELDRIDGE L. ELIASON, M.D. } of Pennsylvania.)

FRED D. WEIDMAN, M.D. (Demonstr. Woman's College of Phila., Univ. of Penna.)

WM. ERWIN, M.D., (Hahnemann and Rush Med. Coll.)

LOUIS H. A. VON COTZHAUSEN, Ph.G., M.D. (Grad. Phila. College of Pharmacy, Med. Dept. Univ. of Penna., Penna. Orthopædic Institute.)

MAX. J. WALTER (Univ. of Penna., Royal Univ. Breslau, Germany, and Lecturer to St. Joseph's, St. Mary's, Mount Sinai and W. Phila. Hospital for Women, Cooper Hospital, etc.) Philadelphia General Hospital (Blockley).

HELENE BONSDORFF (Gymnastic Institute, Stockholm, Sweden.)

LILLIE H. MARSHALL } (Pennsylvania Orthopædic
EDITH W. KNIGHT } Institute.)

CHARLOTTE P. MOODIE (Brookline Free Hosp. for Women, Phila. Lying-In Charity Hosp., Penna. Orth. Institute.)

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STOMATITIS

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Miss Fannie McMillan, class '04, R. V. H., who has been doing private nursing in New York, is now in Calgary as head nurse in one of the surgical wards in the General Hospital there.

Miss Ponton, class '10, one of the assistants in the operating room of the Royal Victoria Hospital, was operated on for appendicitis on October 15 and is making a good recovery.

In September Miss Beatty, class '05, R. V. H., was married to Mr. George Slater, of Edmonton. Early in October Miss Regan, class '07, R. V. H., was married to Dr. Barrett, of Vancouver, and on October 20 Miss Tate, class '10, R. V. H., was married to Dr. Wilson, of Edmonton. The good wishes of their friends in the Alumnae Association follow them to their new homes.

The annual meeting of the Alumnae Association of the Royal Victoria Hospital, Montreal, was held on Wednesday evening, October 11. There was a large attendance of members. The former officers were unanimously elected to fill the same positions for the coming year. It was decided to have the meetings for the winter season as much as possible in the nature of entertainment, and some of the doctors have kindly consented to give papers on subjects other than medical.

Miss Craig, class '08, R. V. H., who has been in charge of the private floor in the Presbyterian Hospital, Chicago, has gone to take a position in the General Hospital, Edmonton, Alta. Miss Truesdale, class '10, has been appointed night superintendent in the same hospital.

Fort William has taken steps to have a district nurse to do visiting nursing among those citizens who are unable to have the services of a nurse in times of illness. The appointment of a nurse trained in the city was approved. Though no action was taken by Port Arthur, many of its citizens feel that a similar step should be taken to ensure skilled nursing for many who will otherwise have very indifferent care in serious illness.

Technical knowledge and scientific training, which are most important, must not cause a nurse to lose sight in any way of the human touch at all times needed in her work. This advice was given to the graduating class of the Hospital for Sick Children last night by Miss Charlotte A. Aitkens, of Detroit, well known to the nursing profession as an editor and author of valuable books on nursing and hospital work. Mr. J. Ross Robertson was in the chair, and gave a most convincing report of the year's work at the training school.

Miss Brent, the Superintendent, administered the Hippocratic Oath and presented the diplomas and medals to the graduates: Spring class—Ethel Brewer, St. Catharines; Nora Moore, Victoria Crown, Jessie Woods and Marjory Gardiner, Toronto; Mabel Winter, Demarara, B. G.; Hattie Fraser, London; Catherine Andrews, Beamsville. Fall class—Zaida Keefer and Gladys Cameron, Toronto; Margaret Wood, Langbank; Brenda Chillas, Montreal.

The scholarships were presented by Mayor Geary as follows: Ethel Brewer, St. Catharines, spring graduating class, received the senior scholarship of $50; Bessie Mitchell, Toronto, a member of the fall class, the intermediate scholarship of $30; Caroline Strang, Toronto, a member of the spring class, the inter-

"a remedy of merit deserves and usually receives consideration, esteem and reward.

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That is our reward. This confidence in Antiphlogistine is daily augmented because of its uniformly good results if applied thick and hot and well protected wherever and whenever inflammation is evident."

mediate scholarship of $30; Isabel Rendell, Montreal, the junior scholarship of $20.

The prizes were presented by Dr. C. K. Clarke as follows: Dorothy Farncomb, Toronto, prize in the senior class; Pearl Austin, Fenelon Falls, prize in intermediate class; Olive Campbell, Belleville, prize in junior class.

The following nurses at present in the school received honorable mention: Mildred R. Wood, Smith's Falls; Hazel Franks and Hilda Hersey, Toronto; Mabel G. Vickery, Port Perry; Ruth Sture, Port Arthur; Jessie Wilson, Wingham; Mabel Partridge, Barrie.

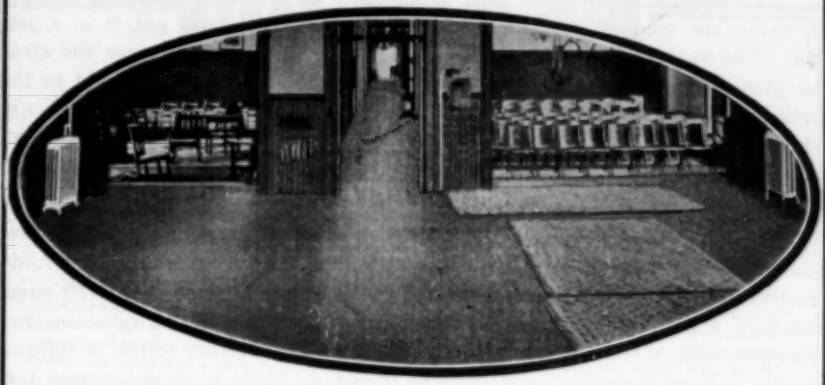
The exercises were followed by an informal reception at the Residence, a dance and refreshments closing the entertainment.—*The Telegram.*

Nurses may be interested to know that they can obtain delicacies for the sick—broths, jellies, custards, etc.—from Miss Sutton, 72 Isabella Street, Toronto. Miss Sutton is desirous of supplying "What you want," and will be glad to have you call and see her.

The Queen Victoria Jubilee Institute of Nurses has been honored by the late Miss Harriet Hughes, who bequeathed her beautiful house and grounds in Bangor as a "Home of Rest" for Queen's Nurses, also an endowment fund toward its support. This munificent gift—"Bryn-y-Menai"—will be much appreciated by Queen's Nurses, whose arduous work makes the word "Rest" sound very sweet. The charge to Queen's Nurses for residence at Bryn-y-Menai has been provisionally fixed at 12/6 per week. You may read about this royal gift in the Queen's Nurses' Magazine for October.

The Nurses' Missionary League was formed in 1903 for the special purpose of bringing before all members of the nursing profession the importance of the missionary enterprise and the great opportunity which medical work affords for the extension of the Kingdom of God. Its distinctive aim is to emphasize the truth that the missionary spirit in its widest sense is essential to the full development of the Christian life. Its basis of appeal is that of service, and it seeks to arouse interest and to secure offers of personal service for the foreign mission field, and also to help those nurses who are not able to go abroad to dedicate their lives and training to the advancement of Christ's Kingdom in the homeland.

The Nurses' Missionary League has now been in existence for seven years, and a glance over its history shows some interesting facts. In the Annual Report published in April, 1905, there was given for the first time a list of nurses working in the mission field. It included 137 names. The list which we publish this year includes 268, showing that the numbers have almost doubled in five years. This fact is significant of the ever-growing importance attached to the nursing side of medical mission work. The standard of nursing in mission hospitals is also being steadily raised. Letters telling of vacant posts constantly state that the applicants must be fully trained, and, if possible, possess a knowledge of midwifery and dispensing. The day is now past when a few months' training was considered sufficient, and it is now realized that the very best and fullest professional training is needed for nursing work in the foreign field.—*Nurses' Missionary League Report,* 1910.



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TO MAKE AN EGG JELLY.

Two eggs, six ounces of loaf sugar, half an ounce of gelatine, one pint of water, the rind of two lemons. Weigh the gelatine and put it in a jelly pan. Add to it half the water. Peel the lemons thinly and squeeze and strain the juice. Make up to half a pint with the remaining water and add to that already in the pan. Add the sugar and beat and add the eggs. Stir with whisk or wooden spoon until the gelatine is melted; then strain, put into a mould and stand in a cool place. The jelly must be stirred all the time until the gelatine is melted.—The Nursing Journal of India.

Vinegar Cake.—Mix together three-quarters of a pound of flour with quarter of a pound of butter till it is as fine as grated breadcrumbs. Add a teaspoonful of bicarbonate of soda, a quarter of a pound of powdered sugar, and half a pound of currants. When these are well mixed, pour in three tablespoonfuls of vinegar and half a pint of milk. If this recipe is followed exactly, a most desirable result will be obtained; there is no unpleasant taste of vinegar, and at a season when eggs are scarce this cake will prove a boon and a blessing to harassed women.

Milk Toast.—Brown and butter some toast, and set it aside to keep hot while you stir smoothly over the fire one tablespoonful each of flour and butter, and one-quarter teaspoonful of salt to each cup of milk. Cook to a smooth, slightly thickened cream. Steep the slices of toast long enough in the liquid to soften them, before serving.—The Nursing Journal of India.

Queen Alexandra's Imperial Military Nursing Service.

War Office, London, S. W., October 17, 1911.

The following ladies have received appointments as Staff Nurse: Miss P. L. Cooper, Miss B. E. Smith, Miss E. W. Bond, Miss M. Nicholson.

Transfers to Stations Abroad.

SISTERS.

Miss N. Blew, to Hong Kong, from Tidworth.
Miss D. J. Saunder, to Malta, from Woolwich.

STAFF NURSES.

Miss M. E. Smith, to Hong Kong, from Woolwich.

E. H. BECHER,
Matron-in-Chief, Q.A.I.M.N.S.

ANNOUNCEMENT.

The Pennsylvania Orthopaedic Institute and School of Mechano-Therapy, Inc., 1711 Green Street, Philadelphia, Pa., wishes to announce the opening of the second section of the fall classes on November 15, 1911. Applicants for this class are requested to report at 10 a.m. on this day for registration. If you have not sent in your application, kindly do so at once. If you are interested in our line of work, write for particulars and illustrated prospectus. The latest issue of the Philadelphia Journal of Physiological Therapeutics is just off the press; if you like to have a copy, ask for it.

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Gives a new conception of what can be accomplished with a milk diet in the treatment of Pneumonia, Bronchitis, Neurasthenia, Tuberculosis, as well as children suffering from Malnutrition. All the food value of pure milk enriched and modified with the soluble nutritive extracts of choice malted cereals. The ratio of protein to carbohydrate and its perfect digestibility commend it as a reliable reconstructive. Has a delicious flavor, that makes it acceptable to those who rebel against plain milk as a steady diet.

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MARRIAGES.

WESTON—HUNT—At Trinity Methodist Church, Port Arthur, Ont., on November 1, by the Rev. M. Churchill, Mr. E. Weston to Miss Lillian Hunt.

Miss Hunt is a graduate of St. Joseph's Hospital, London, Ont., class '07.

McGUIRE—MacNEVIN—At Our Lady of Lourdes Church, Sherbourne Street, Toronto, on October 24, Miss Anna MacNevin to Mr. Wm. H. McGuire, barrister.

Miss MacNevin is a graduate of St. Michael's Hospital, Toronto, class '04, and the Alumnae Association, of which she has been Treasurer for some time, presented her with a very pretty tea table. Mr. and Mrs. McGuire will reside in the Nanton Apartments, Rosedale.

WOODHALL—TOUCHBOURNE—On September 20, at St. John's Church, Cowan, Ont., by the Rev. Canon Allan, Elva Eloise Touchbourne to Dr. Frank Woodhall, Binbrook, Ont.

Miss Touchbourne is a graduate of Hamilton City Hospital, class '09.

BRIGGS—GLASS—In Hamilton, on November 9, by Rev. E. A. Mitchell, Edith Glass to Charles Henry Briggs.

Miss Glass is a graduate of Hamilton City Hospital, class '09.

BIRTHS.

LEMON—In Lethbridge, Alta., on November 1, to Mr. and Mrs. Harry Lemon, a son.

Mrs. Lemon (née Hanham) is a graduate of Hamilton City Hospital, class '08.

KILGOUR—In Brandon, Man., on June 19, to Mr. and Mrs. J. W. Kilgour, a son.

Mrs. Kilgour (née Currie) is a graduate of Hamilton City Hospital.

DEATH.

FAWNS—At the Cottage Hospital on Saturday, October 14, 1911, Grace Isabel Younger, beloved wife of Dr. Sidney Fawns, 1209 College Street, Toronto.

Mrs. Fawns (nee Younger) was a graduate of Toronto General Hospital and much beloved by her sister nurses, who extend sincere sympathy to the bereaved husband, mother, sisters and brother.

Appointments, Promotions and Retirements, Canadian Militia, 1911.

Headquarters, Ottawa, September 26, 1911.

Nursing Sister Miss Ruth E. Pentland is retired. September 15, 1911.

Leave of absence has been granted:

Nursing Sister M. M. Pugh, C.A.M.C., for three months from the 11th inst.

Nursing Sister L. E. Eaton, P.A.M.C., from the 9th to 13th inst., inclusive.

Nursing Sister A. C. Strong, P.A.M.C., from the 1st July to 1st August, 1911.

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PUBLISHER'S PAGE

INFANTILE PARALYSIS TRANSMISSION INVESTIGATED BY PHYSICIANS.

Dr. Marcus Neusteadter read an interesting paper before the neurological division of the Academy of Medicine, in which he explains a series of experiments in conjunction with Dr. Wiliam Thro, of the Cornell Medical College, for the purpose of determining the manner of the spread of infantile paralysis.

As a basis for his experiments, which were made on six monkeys, Dr. Neusteadter adopted the hypothesis that infantile paralysis, like so many other dangerous affections, is a dust disease, contracted by children coming in contact with or breathing in the dust of any room infected with paralytic germs. During March Dr. Neusteadter and Dr. Thro collected the sweepings from rooms in which there were nineteen different cases of infantile paralysis of from three to six months standing. These collections of dust were taken from the walls, floors and wooden trimmings of the different rooms, and were then dried, sifted, macerated and dissolved in a normal salt solution. The resulting solution was injected into the brains of six monkeys. Five showed prominent symptoms of paresis, in some cases paralysis being complete. The physicians present agreed that the monkeys were undoubtedly paralytic and that an important chapter had been added to the medical knowledge of the disease.

In the light of recent scientific research the dangers of dust as an ever-ready vehicle for the spreading of disease germs are attracting more and more attention among medical men everywhere. In this connection the value of Standard Floor Dressing as a dust preventive is receiving wide recognition. Standard Floor Dressing is a mineral preparation notably effective in catching all dust the instant it settles on the floor and holding it there until it is swept away.

CHILD WELFARE.

Every nurse is interested in this subject and has seen, or read of, exhibitions more or less elaborate that have been held all over the country. Each nurse wants to apply some of the suggestions and methods as best suit her individual cases. The city, town and country nurse all find varying circumstances which her training and ingenuity have to meet, independent of medical supervision. Usually the welfare of the child has to begin with the parents, and as Dr. Holmes once said, should begin a century before a child is born.

One welfare need is common to all children everywhere—adequate and assimilable food. Usually, when a nurse's services come into play, something besides regular diet is required to get the digestive tract in working order and at the same time thoroughly nourish the hungry tissues. This combination of needs is perfectly met by Scott's Emulsion and this absolutely pure food remedy is no tax on the weakest infantile stomach. Thousands of babies have eagerly taken drop doses of the emulsion when no other food is retained. It was marvelous to see the benefits resulting from its use last summer in congested city sections.

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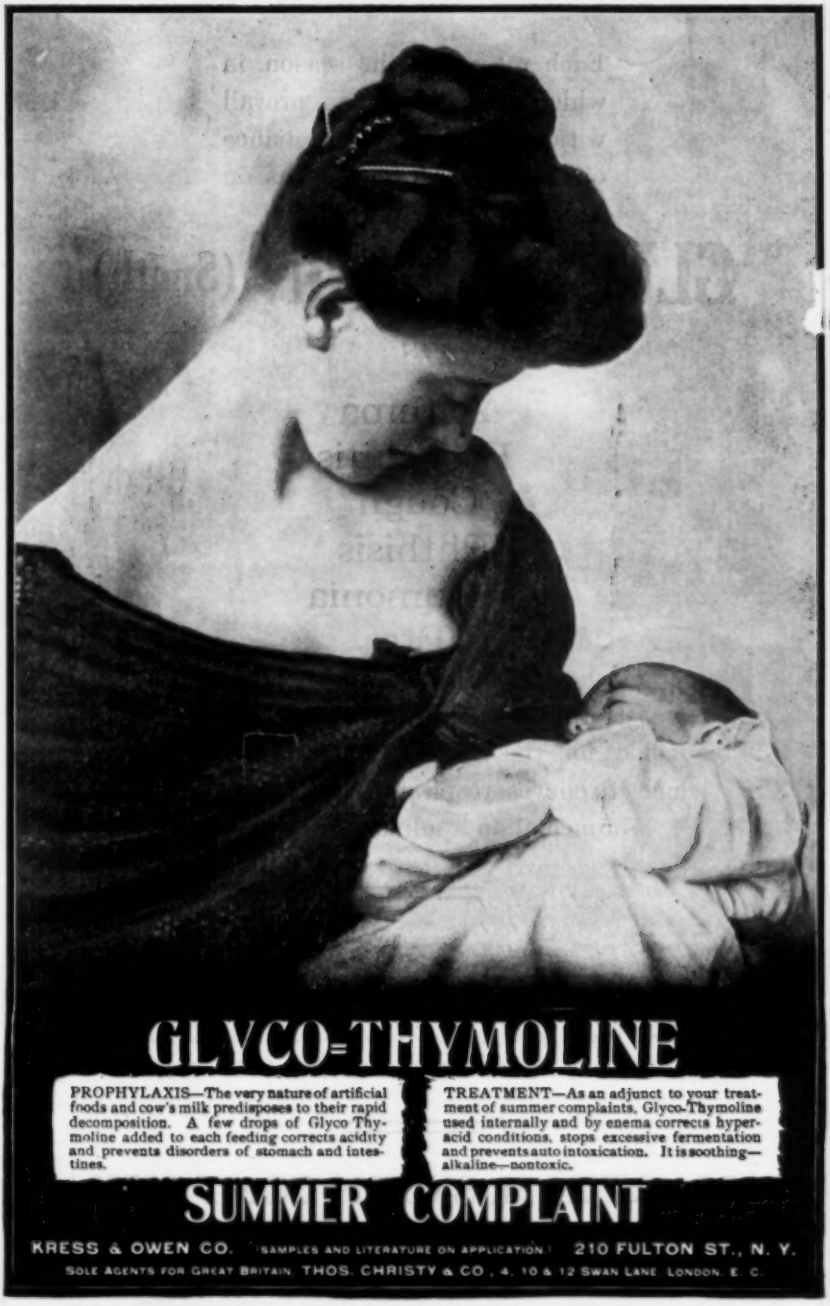
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